



March 9, 2021

The Honorable Fred Wood
Idaho House of Representatives
Health and Welfare Committee
PO Box 1207
Burley, ID 83318-0828

RE: ASHA Comments on Telehealth; HB 179

Dear Chairman Wood:

On behalf of the American Speech-Language-Hearing Association, I write to express support for House Bill 179, which further defines interstate telehealth services and declares that providers not licensed in Idaho may provide telehealth services to an Idaho resident or person located in the state who meets certain requirements.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 900 ASHA members reside in Idaho.¹

As the leading national organization for the certification and advancement of audiologists and speech-language pathologists (SLPs), ASHA supports the development and use of telepractice or telehealth. ASHA maintains a collection of professional practice documents, including a position statement that defines telehealth as “the application of telecommunications technology to deliver professional services at a distance by linking clinician to client, or clinician to clinician for assessment, intervention, and/or consultation.”

These documents include a technical report and service delivery guidelines that may be accessed on ASHA’s website at <http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/>.

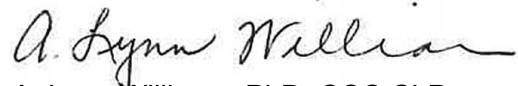
Research demonstrates the equivalence of telehealth to in-person service delivery for a wide range of diagnostic and treatment procedures for adults and children.² Studies have shown high levels of patient, clinician, and parent satisfaction supporting telehealth as an effective alternative to the in-person model for delivery of care.³ Telehealth expands practitioners’ availability to those in need—regardless of geographic location—saving time and resources for both the provider and the patient.

Despite proven benefits, telehealth remains underutilized nationwide within audiology and speech-pathology due to a lack of clear state laws governing its use or mandating appropriate reimbursement for services delivered. House Bill 179 will further support the health care needs of Idaho residents during the COVID-19 pandemic and into the future.

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Thank you for your consideration of ASHA's position to support HB 179. If you or your staff have any questions, please contact Eileen Crowe, ASHA's director, state association relations, at ecrowe@asha.org.

Sincerely,



A. Lynn Williams, PhD, CCC-SLP
2021 ASHA President

¹ American Speech-Language-Hearing Association. (2020). *Idaho* [Quick Facts]. <https://www.asha.org/siteassets/uploadedfiles/Idaho-State-Flyer.pdf>.

² Grogan-Johnson, S., Alvares, R., Rowan, L., & Creaghead, N. (2010). A pilot study comparing the effectiveness of speech language therapy provided by telemedicine with conventional on-site therapy. *Journal of Telemedicine and Telecare*, 16, 134–139.

³ Ibid.